Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 5 of 67

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF SOUTH CAROLINA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1: Identify Yourself	Identify Yourself							
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):						
1.	Your full name								
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture	Rosa First name Marie Middle name	First name Middle name						
	identification to your meeting with the trustee.	Cheeks Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)						
2.	All other names you hav	e							
	Include your married or maiden names.								
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7110							

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 6 of 67

Case number (if known) Debtor 1 Rosa Marie Cheeks

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	65 Villa Rd., Apt. 1501	If Debtor 2 lives at a different address:		
		Greenville, SC 29615 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Greenville			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		PO Box 31306 Greenville, SC 29605			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition,	Check one: Over the last 180 days before filing this petition, I		
		I have lived in this district longer than in any other district.	have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 7 of 67

Debtor 1 Rosa Marie Cheeks

Case number (if known)

Par	Tell the Court About	Your E	3ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	Chapter 7						
			Chapter 11					
		_	hapter 12					
			Chapter 13					
			·					
8.	How you will pay the fee		about how yo	u may pay. Typ attorney is sub	pically, if you are paying the f	check with the clerk's office in your loca fee yourself, you may pay with cash, cas r behalf, your attorney may pay with a cr	hier's check, or money	
					stallments. If you choose this ts (Official Form 103A).	s option, sign and attach the Application	for Individuals to Pay	
			but is not requapplies to you	uired to, waive ur family size a	your fee, and may do so only nd you are unable to pay the	option only if you are filing for Chapter 7 y if your income is less than 150% of the fee in installments). If you choose this o (Official Form 103B) and file it with your	official poverty line that ption, you must fill out	
			are Approau	ar to riavo aio	enapter / / ming / ee wawea	(Onloan Form 1992) and more manyour	poutern.	
9.	Have you filed for bankruptcy within the	■ N						
	last 8 years?	□ Y			\ \			
			District		When When	Case number Case number		
			District		when When			
			District		wrien	Case number		
10.	Are any bankruptcy cases pending or being	■ N	0					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an	□ Y	es.					
	affiliate?		5.1.			B.1.00		
			Debtor		When	Relationship to you		
			District Debtor		when	Case number, if know Relationship to you	/n	
			District		When	Case number, if know		
			District		writeri	Case number, il know		
11.	Do you rent your residence?	□ N	o. Go to li	ine 12.				
	residence :	■ Y	es. Has yo	ur landlord obt	ained an eviction judgment a	gainst you?		
				No. Go to line	12.			
				Yes. Fill out Ir bankruptcy pe		ction Judgment Against You (Form 101A	and file it with this	

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 8 of 67

Debtor 1 Rosa Marie Cheeks Case number (if known)

art	3: Report About Any Bu	sinesses `	You Own	as a Sole Proprieto	or			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of busi	iness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	e & ZIP Code			
	it to this petition.		Check		x to describe your business:			
					ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))			
				Commodity Broker	r (as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	u are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set applines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, stat attons, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the p U.S.C. 1116(1)(B).					
	For a definition of small	No.	o. I am not filing under Chapter 11.					
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am fi	ling under Chapter 1	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
art	4: Report if You Own or	Have Any	Hazardo	us Property or Any	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is t	he hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	Number, Street, City, State & Zip Code			

Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Case 19-05088-hb Doc 1 Document Page 9 of 67

Debtor 1 Rosa Marie Cheeks

Case number (if known)

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Page 10 of 67 Document Debtor 1 Rosa Marie Cheeks Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Rosa Marie Rosa Marie Signature of D	Cheeks	Signature of Debtor 2
Executed on	September 27, 2019	Executed on
	MM / DD / YYYY	MM / DD / YYYY

Entered 09/27/19 12:03:15 Case 19-05088-hb Doc 1 Filed 09/27/19 Desc Main Page 11 of 67
Case number (if known) Document

Debtor 1 Rosa Marie Cheeks

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Edward L. Bailey	Date	September 27, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Edward L. Bailey 1153		
Printed name		
Bailey Law Firm		
Firm name		
251 South Pine Street		
Spartanburg, SC 29302		
Number, Street, City, State & ZIP Code		
Contact phone (864) 582-3733	Email address	
1153 SC		
Bar number & State		

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main

		Docume	ent Page 12 of 6	<u>i/</u>	
Fill in this inform	nation to identify your	case:			
Debtor 1	Rosa Marie Chee	ks			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA		
Case number					
(if known)					Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	1: Summarize Your Assets		
		Your as	ssets If what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	25,495.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	25,495.00
Par	2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	26,567.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	5,500.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	80,735.00
	Your total liabilities	\$	112,802.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	0.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,853.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your dehts are primarily consumer dehts. Consumer dehts are those "incurred by an individual primarily for	a nersonal	family or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 19-05088-hb Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Doc 1 Document

Page 13 of 67 Case number (if known) Debtor 1 Rosa Marie Cheeks

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form \$ 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,174.50

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	5,500.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	42,439.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	47,939.00

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main

Fill in this inform	motion to identify your coop	Document Page 14 of 67	.7713 12:00:10	330 IVIAIII
	mation to identify your case	and this filing:		
Debtor 1	Rosa Marie Cheeks First Name	Middle Name Last Name		
Debtor 2	riist Name	Midule Name Last Name		
Spouse, if filing)	First Name	Middle Name Last Name		
Jnited States Ba	ankruptcy Court for the: DIST	RICT OF SOUTH CAROLINA		
Case number				☐ Check if this is an
_				amended filing
Official Fo	rm 106A/B			
Schedul	e A/B: Propert	V		12/15
nink it fits best. B nformation. If mor nswer every ques	le as complete and accurate as p e space is needed, attach a sepa stion.	s. List an asset only once. If an asset fits in more than o possible. If two married people are filing together, both a parate sheet to this form. On the top of any additional pag , or Other Real Estate You Own or Have an Interest In	are equally responsible for sup	plying correct
Do you own or I	have any legal or equitable inter	est in any residence, building, land, or similar property?		
■ No. Go to Par	t 2.			
☐ Yes. Where i	s the property?			
Part 2: Describe	Your Vehicles			
20001130	Tour vollioloo			
_	Chrysler Pacifica	Who has an interest in the property? Check one Debtor 1 only	Do not deduct secured clai the amount of any secured Creditors Who Have Claim	claims on Schedule D:
Year:	2005	☐ Debtor 2 only	Current value of the	Current value of the
Approximat		Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other inform		☐ At least one of the debtors and another		
VIN: 2C4	IGM68455R550014	☐ Check if this is community property (see instructions)	\$500.00	\$500.00
-	Chevrolet Cruze	Who has an interest in the property? Check one Debtor 1 only	Do not deduct secured clai the amount of any secured Creditors Who Have Claim	claims on Schedule D:
Year:	2015	☐ Debtor 2 only	Current value of the	Current value of the
Approximat		Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other inforr		☐ At least one of the debtors and another		
VIN: 1G1	PC5SB1F7145364	☐ Check if this is community property (see instructions)	\$11,495.00	\$11,495.00
L		•		
Matararati -:	roraft motor homes ATV	nd other regrestional vahiolog ather vahiolog	d accessories	
		nd other recreational vehicles, other vehicles, and atercraft, fishing vessels, snowmobiles, motorcycle a		
	,,	, 1 3 111111, 3111111111111111, 11111111111		
■ No				
Πvoc				

Official Form 106A/B Schedule A/B: Property page 1

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 15 of 67

pages you have Part 3: Describe You Do you own or have 6. Household good	value of the portion you own for all of your entries from Part 2, including any entries for eattached for Part 2. Write that number here	
Part 3: Describe You Do you own or have 6. Household good Examples: Major No	ur Personal and Household Items ve any legal or equitable interest in any of the following items?	Current value of the
Do you own or have 6. Household good Examples: Major □ No	ve any legal or equitable interest in any of the following items?	
6. Household good <i>Examples:</i> Major		
Examples: Major ☐ No —	Is and furnishings	Do not deduct secured claims or exemptions.
	appliances, furniture, linens, china, kitchenware	ciams of exemptions.
	Kitchenware 400 LR furniture 700 BR furniture 1000 DR furniture/kitchen table/chairs 500 Microwaves 25	\$2,645.00
	isions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; l ding cell phones, cameras, media players, games	music collections; electronic devices
	3 televisions, 2 sound systems, alarm clock, 1 tablet, 3 laptops, 1 DVR/Playstation 4, 1 gaming system, 1 cell phone.	\$3,100.00
	ues and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stam collections, memorabilia, collectibles	np, coin, or baseball card collections;
	s, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; c cal instruments	anoes and kayaks; carpentry tools;
	Treadmill	\$25.00
	2 Samsung camcorders	\$30.00
10. Firearms Examples: Pisto ■ No □ Yes. Describe	ols, rifles, shotguns, ammunition, and related equipment	
11. Clothes Examples: Ever No Yes. Describe	ryday clothes, furs, leather coats, designer wear, shoes, accessories	
	Clothes, shoes, and accessories	\$250.00
	Oloules, silves, allu accessories	Ψ230.00

12. **Jewelry** *Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

Dobtor 1	Case 19-05088-h		Filed 09/27/19 Entered 09/27/19 12:03:2 Document Page 16 of 67 Case number (if know)	L5 Desc Main
Debtor 1	Rosa Marie Cheeks	<u> </u>	Case number (ir know	n)
■ Yes	s. Describe			
	Misc.	inexpensive je	welry	\$30.00
Exan ■ No	iarm animals nples: Dogs, cats, birds, ho s. Describe	rses		
■ No	other personal and house	-	lid not already list, including any health aids you did not list	
			n Part 3, including any entries for pages you have attached	\$6,080.00
	escribe Your Financial Asse own or have any legal or e		in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No			home, in a safe deposit box, and on hand when you file your pe	
	sits of money nples: Checking, savings, o	or other financial a	ccounts; certificates of deposit; shares in credit unions, brokerag	ge houses, and other similar
□ No ■ Yes	institutions. If you ha	ve multiple accou	nts with the same institution, list each. Institution name:	
		Checking	Sharonview Credit Union acct #***1791	\$1,113.00
	17.2.	Savings	Sharonview Credit Union acct #***1791	\$175.00
	17.3.	Savings	SC Telco acct	\$60.00
18. Bond Exan	s, mutual funds, or public	cly traded stocks ent accounts with	s brokerage firms, money market accounts	
■ No □ Yes	3	Institution or issu	er name:	
	oublicly traded stock and venture	interests in inco	rporated and unincorporated businesses, including an inter	est in an LLC, partnership, and
☐ Yes	s. Give specific information Na	about them me of entity:		
Nego	otiable instruments include	personal checks,	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	

Official Form 106A/B Schedule A/B: Property page 3

Debtor '	Case 19-05088-nb	Document	Page 17 of 67	L5 Desc Main
Debtoi	Rosa Marie Cheeks		Case number (if know	n)
□ Ye	es. Give specific information abou Issuer n			
		(eogh, 401(k), 403(b), thrift sav	rings accounts, or other pension or profit-sharing	ng plans
■ Ye	es. List each account separately. Type of ac	count: Institutio	on name:	
	Pension	Kraft H	leinz Retirement Plan	\$0.00
Υοι	amples: Agreements with landlord	u have made so that you may c	continue service or use from a company electric, gas, water), telecommunications comp	panies, or others
	es	Institutio	on name or individual:	
	Rental de	eposit Overlo	ok Apartments	\$650.00
	Electric	Duke E	Energy deposit	\$200.00
24. Inter 26 U No 1 Ye 25. Trus	lssuer name and lssuer name and lss.c. §§ 530(b)(1), 529A(b), and so lnstitution name	d description. account in a qualified ABLE 529(b)(1). and description. Separately file in property (other than anyther)	program, or under a qualified state tuition per the records of any interests.11 U.S.C. § 521((c):
Exa ■ No □ Ye 27. Lice Exa ■ No	es. Give specific information about enses, franchises, and other ger amples: Building permits, exclusive	rebsites, proceeds from royalties ut them neral intangibles e licenses, cooperative associa		nses
Exa ■ No □ Ye 27. Lice Exa ■ No □ Ye	amples: Internet domain names, woo es. Give specific information about enses, franchises, and other gen amples: Building permits, exclusive	rebsites, proceeds from royalties ut them neral intangibles e licenses, cooperative associa	es and licensing agreements	Current value of the portion you own? Do not deduct secured claims or exemptions.
Exa	amples: Internet domain names, woo es. Give specific information about enses, franchises, and other gen emples: Building permits, exclusive o es. Give specific information about or property owed to you? refunds owed to you	rebsites, proceeds from royalties ut them neral intangibles e licenses, cooperative associa ut them	es and licensing agreements	Current value of the portion you own? Do not deduct secured
Exa	amples: Internet domain names, woo es. Give specific information about enses, franchises, and other gen emples: Building permits, exclusive o es. Give specific information about or property owed to you? refunds owed to you	rebsites, proceeds from royalties ut them neral intangibles e licenses, cooperative associa ut them	es and licensing agreements	Current value of the portion you own? Do not deduct secured

■ No

	Case 19-0508	8-110 DOC 1	Document	Page 18 of 67	Desc Main
Debtor	Rosa Marie Che	eks	Doddinent	Case number (if known)	
□ Ye	es. Give specific informat	tion			
	benefits; unpaid			nefits, sick pay, vacation pay, workers' compen	sation, Social Security
	es. Give specific informa	ation			
Exa		, or life insurance; hea	_	(HSA); credit, homeowner's, or renter's insuran	ce
■ Ye	es. Name the insurance of	company of each police Company name:	cy and list its value.	Beneficiary:	Surrender or refund value:
		Date of Issue: 1/- Insurance Co: Se Policy No.: Face Value: \$.,	Julia Lyons	\$0.00
		-			
If you son If you son No Ye 33. Claim Example No Ye 34. Oth No Ye 35. Any No	meone has died. Des. Give specific informations against third parties amples: Accidents, employees. Describe each claim. Describe each claim.	a living trust, expect partition s, whether or not you by ment disputes, insufficient in the partition of experiment disputes of exper	proceeds from a life in but have filed a lawsumance claims, or right	nsurance policy, or are currently entitled to rece	
	d the dollar value of all Part 4. Write that num			nny entries for pages you have attached	\$7,420.00
Part 5:	Describe Any Business-R	elated Property You Ov	wn or Have an Interest	In. List any real estate in Part 1.	
	ou own or have any legal o	or equitable interest in	any business-related p	property?	
☐ Yes	s. Go to line 38.				
Part 6:	Describe Any Farm- and C If you own or have an intere			n or Have an Interest In.	
=	you own or have any le No. Go to Part 7. Yes. Go to line 47.	gal or equitable inte	erest in any farm- or	commercial fishing-related property?	
Part 7:	Describe All Property	y You Own or Have an	Interest in That You Di	d Not List Above	

Official Form 106A/B Schedule A/B: Property page 5

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 19 of 67

Debtor 1	Rosa Marie Cheeks	ument	Page 19 of 67 Case number (if known)	
	have other property of any kind you did not al	ready list?		

	No				
	Yes. Give specific information				
54.	Add the dollar value of all of your entries from Part 7. Writ	e that n	umber here		\$0.00
Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$11,995.00		
57.	Part 3: Total personal and household items, line 15		\$6,080.00		
58.	Part 4: Total financial assets, line 36		\$7,420.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$25,495.00	Copy personal property to	tal \$25,495.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$25,495.00

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main

Fill in this infor	mation to identify your	case:		
Debtor 1	Rosa Marie Chee	ks		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

 Brief description of the property and line on Current value of the Amount of the exemption you claim.

Schedule A/B that lists this property	portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Kitchenware 400 LR furniture 700 BR furniture 1000 DR furniture/kitchen table/chairs 500 Microwaves 25 Line from Schedule A/B: 6.1	\$2,645.00		\$2,645.00 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(3)
3 televisions, 2 sound systems, alarm clock, 1 tablet, 3 laptops, 1 DVR/Playstation 4, 1 gaming system, 1 cell phone. Line from Schedule A/B: 7.1	\$3,100.00		\$2,230.00 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(3)
Treadmill Line from Schedule A/B: 9.1	\$25.00		\$25.00 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(7)
2 Samsung camcorders Line from Schedule A/B: 9.2	\$30.00		\$30.00 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30(A)(7)

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Mair Document Page 21 of 67

Rosa Marie Cheeks Case number (if known) Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Clothes, shoes, and accessories S.C. Code Ann. § \$250.00 \$250.00 Line from Schedule A/B: 11.1 15-41-30(A)(7) 100% of fair market value, up to any applicable statutory limit Misc. inexpensive jewelry S.C. Code Ann. § \$30.00 \$30.00 15-41-30(A)(4) Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Cash on Hand S.C. Code Ann. § \$5,222.00 \$5,222.00 Line from Schedule A/B: 16.1 15-41-30(A)(5) 100% of fair market value, up to any applicable statutory limit Checking: Sharonview Credit Union S.C. Code Ann. § \$8.00 \$1,113.00 acct #***1791 15-41-30(A)(5) Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Checking: Sharonview Credit Union S.C. Code Ann. § \$1,113.00 \$1,105.00 15-41-30(A)(7) acct #***1791 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings: Sharonview Credit Union S.C. Code Ann. § \$175.00 \$175.00 acct #***1791 15-41-30(A)(7) Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Savings: SC Telco acct S.C. Code Ann. § \$60.00 Line from Schedule A/B: 17.3 15-41-30(A)(7) 100% of fair market value, up to any applicable statutory limit Pension: Kraft Heinz Retirement Plan 11 U.S.C. 522(b)(3)(C) \$0.00 100% Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Rental deposit: Overlook Apartments S.C. Code Ann. § \$650.00 \$650.00 Line from Schedule A/B: 22.1 15-41-30(A)(5) 100% of fair market value, up to any applicable statutory limit Electric: Duke Energy deposit S.C. Code Ann. § \$200.00 \$200.00 Line from Schedule A/B: 22.2 15-41-30(A)(5) 100% of fair market value, up to any applicable statutory limit Date of Issue: 1/1/17 S.C. Code Ann. § \$0.00 Insurance Co: Securian 15-41-30(A)(8) and (9) and § 100% of fair market value, up to Policy No.: 38-63-40(A) any applicable statutory limit Face Value: \$ Beneficiary: Julia Lyons Line from Schedule A/B: 31.1

Case 19-05088-hb Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 22 of 67 Debtor 1 Rosa Marie Cheeks Case number (if known) 3. Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Doc 1

Yes

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 23 of 67

DETERMINATION OF AVAILABILITY OF WILDCARD EXEMPTION Rosa Marie Cheeks

Debtor

Exemption Description	Available	Used	Unused
Homestead §15-41-30(A)(1)	Cash	\$0	\$0
Motor Vehicle §15-41-30(A)(2)	\$6,100	\$0	\$6,100
HHG/Clothes §15-41-30(A)(3)	\$4,875	\$4,875	\$0
Jewelry §15-41-30(A)(4)	\$1,225	\$30	\$1,195
Cash/liquid assets §15-41-30(A)(5)	Cash	\$6,100	\$0
Tools of the trade §15-41-30(A)(6)	\$1,825	\$0	\$1,825
Wildcard available (unused column total but no m	\$6,100		
Wildcard used	\$1,645		
Wildcard unused			\$4,455

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main

	Document	Page 2	<u>'4 01 6 / </u>		
Fill in this information to identify yo	our case:				
Debtor 1 Rosa Marie Ch	eeks				
First Name	Middle Name	Last Name			
Debtor 2	Middle News	Last Name			
(Spouse if, filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the	e: DISTRICT OF SOUTH CAROL	JNA			
Case number (if known)				☐ Check	if this is an
				_	led filing
Official Form 106D					
Schedule D: Creditors	s Who Have Claims	Secure	ed by Propert	V	12/15
Schedule B. Greattor	S WHO HAVE CIAITIS		od by i ropert	<i>y</i>	12/13
Be as complete and accurate as possible is needed, copy the Additional Page, fill it					
number (if known).	out, number the entires, and attach it	to tills form.	On the top of any addition	nai pages, write your nai	ne and case
1. Do any creditors have claims secured I	by your property?				
☐ No. Check this box and submit	this form to the court with your other	schedules.	You have nothing else to	o report on this form.	
■ Yes. Fill in all of the information	, helow		· ·	·	
	i below.				
Part 1: List All Secured Claims			. Column A	Column B	Column C
List all secured claims. If a creditor has for each claim. If more than one creditor has			ely	Value of collateral	Unsecured
much as possible, list the claims in alphabe			Do not deduct the	that supports this	portion
2.1 AutoMoney, Inc.	Describe the property that secures	the claim:	value of collateral. \$1,200.00	claim <i>\$500.00</i>	If any \$700.00
2.1 AutoMoney, Inc. Creditor's Name	2005 Chrysler Pacifica 261,6		φ1,200.00	φ300.00	\$700.00
	VIN: 2C4GM68455R550014	Jor IIIIles			
501 Mauldin Road	As of the date you file, the claim is: apply.	Check all that			
Greenville, SC 29605	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as car loan)	mortgage or s	secured		
Debtor 2 only					
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit	Motorvo	hiolo loon		
☐ Check if this claim relates to a community debt	Other (including a right to offset)	- WOLOT VE	hicle loan		
Date debt was incurred	Last 4 digits of account num	ber 1911	<u> </u>		
2.2 Badcock	Describe the property that secures	the claim:	\$4,108.00	Unknown	Unknown
Creditor's Name	Living room furniture, bed				
PO Box 724	As of the date you file, the claim is:	Check all that			
Mulberry, FL 33860	apply. Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	\square An agreement you made (such as	mortgage or s	secured		
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
lacksquare At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)	Furniture	e/Appliances		
community debt					
Date debt was incurred	Last 4 digits of account num	her 5821	2		

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 25 of 67

Debtor 1 Rosa Marie Cheeks		Case number (if known)		
First Name Middle N	ame Last Name			
2.3 Bridgecrest Acceptance Corp.	Describe the property that secures the claim:	\$15,643.00	\$11,495.00	\$4,148.00
Creditor's Name	2015 Chevrolet Cruze VIN: 1G1PC5SB1F7145364			
PO Box 2997 Phoenix, AZ 85062-2997	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or se car loan)	ecured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Date debt was incurred				
2.4 Cash Loan	Describe the property that secures the claim:	\$1,056.00	Unknown	Unknown
		\$1,056.00	<u>Unknown</u>	Unknown
2.4 Cash Loan	Describe the property that secures the claim: Personal Property As of the date you file, the claim is: Check all that apply.	\$1,056.00	Unknown _	Unknown
2.4 Cash Loan Creditor's Name 200 N Pleasantburg Dr., Ste. B Greenville, SC 29607	Describe the property that secures the claim: Personal Property As of the date you file, the claim is: Check all that apply. Contingent	\$1,056.00	Unknown	Unknown
2.4 Cash Loan Creditor's Name 200 N Pleasantburg Dr., Ste. B	Describe the property that secures the claim: Personal Property As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$1,056.00	Unknown	Unknown
2.4 Cash Loan Creditor's Name 200 N Pleasantburg Dr., Ste. B Greenville, SC 29607 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only	Describe the property that secures the claim: Personal Property As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	.,	Unknown _	Unknown
2.4 Cash Loan Creditor's Name 200 N Pleasantburg Dr., Ste. B Greenville, SC 29607 Number, Street, City, State & Zip Code Who owes the debt? Check one.	Describe the property that secures the claim: Personal Property As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or se	.,	Unknown	Unknown
2.4 Cash Loan Creditor's Name 200 N Pleasantburg Dr., Ste. B Greenville, SC 29607 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	Describe the property that secures the claim: Personal Property As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or se car loan)	.,	Unknown	Unknown
2.4 Cash Loan Creditor's Name 200 N Pleasantburg Dr., Ste. B Greenville, SC 29607 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Describe the property that secures the claim: Personal Property As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or se car loan) Statutory lien (such as tax lien, mechanic's lien)	ecured	Unknown	Unknown

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 26 of 67

Debtor 1 Rosa Marie Cheeks			er (if known)		
First Name	Middle Name Last Name		_		
World 2.5 Acceptance/Finance Corp	Describe the property that secures th	ne claim: \$4	1,560.00	Unknown	Unknown
Creditor's Name	Personal Property				
Attn: Bankruptcy Po Box 6429 Greenville, SC 29606 Number, Street, City, State & Zip Who owes the debt? Check one Debtor 1 only Debtor 2 only	As of the date you file, the claim is: C apply. Code Code Code Disputed				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mech	nanic's lien)			
☐ At least one of the debtors and	_	iamo o morry			
☐ Check if this claim relates to community debt	a Other (including a right to offset)	Personal Property			
Open 07/15 Activ Date debt was incurred 12/31.	Last e	er 5901	_		
Add the dollar value of your en	tries in Column A on this page. Write that numb	er here:	\$26,567.00	0	
If this is the last page of your for Write that number here:	orm, add the dollar value totals from all pages.		\$26,567.00	-	
Part 2: List Others to Be No	otified for a Debt That You Already Listed				
Use this page only if you have of trying to collect from you for a de	hers to be notified about your bankruptcy for a ebt you owe to someone else, list the creditor in lebts that you listed in Part 1, list the additional	Part 1, and then list the	collection agency	here. Similarly, if you	u have more
Name, Number, Street, City World Acceptance/F		On which line in Pa	rt 1 did you enter th	ne creditor? 2.5	
108 Fredrick St. Greenville, SC 29607	•	Last 4 digits of acco	ount number		

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main

			Document	Page 27 of	67		
Fill i	n this inform	ation to identify your ca					
Debt	or 1	Rosa Marie Cheeks	•				
		First Name	Middle Name	Last Name			
Debt		First Name	Medalla Nama	Last Name			
(Spous	se if, filing)	First Name	Middle Name	Last Name			
Unite	ed States Ban	kruptcy Court for the:	DISTRICT OF SOUTH CARO	LINA			
Case	number						
(if know						☐ Check	if this is an
						amend	ed filing
∩ffi.	cial Form	106E/E					
			o Have Unsecured	Claims			12/15
			Part 1 for creditors with PRIORIT				
Sched eft. A	lule D: Credito ttach the Cont	rs Who Have Claims Secur	ed Leases (Official Form 106G). I ed by Property. If more space is If you have no information to re	needed, copy the Par	t you need, fill it out,	number the entries ir	the boxes on the
Part	1: List All	of Your PRIORITY Unse	ecured Claims				
1. D	o any creditor	rs have priority unsecured	claims against you?				
	☐ No. Go to Pa	art 2.					
	Yes.						
ic p	dentify what type ossible, list the	e of claim it is. If a claim has claims in alphabetical order	If a creditor has more than one price both priority and nonpriority amour according to the creditor's name. If cular claim, list the other creditors	nts, list that claim here a f you have more than to	and show both priority a	nd nonpriority amount	s. As much as
(I	For an explanat	tion of each type of claim, see	e the instructions for this form in the	e instruction booklet.)			
					Total claim	Priority amount	Nonpriority amount
2.1	Internal	Revenue Service*	Last 4 digits of accou	unt number	\$5,000.00	\$5,000.00	\$0.00
	,	ditor's Name	NAME of the Asia Asia Asia Asia Asia Asia Asia Asia			·	· · · · · · · · · · · · · · · · · · ·
	PO Box	zed Insolvency 7346	When was the debt in	ncurred?		-	
		phia, PA 19104-7346					
		eet City State Zip Code	As of the date you file	e, the claim is: Check	all that apply		
	Who incurred	the debt? Check one.	☐ Contingent				
	■ Debtor 1 or	nly	☐ Unliquidated				
	Debtor 2 or	nly	☐ Disputed				
	Debtor 1 ar	nd Debtor 2 only	Type of PRIORITY un	secured claim:			
	☐ At least one	e of the debtors and another	☐ Domestic support of	bligations			
	☐ Check if th	is claim is for a communit	y debt Taxes and certain of	other debts you owe the	e government		
	Is the claim su	ubject to offset?		personal injury while y			
	■ No		☐ Other. Specify				
	☐ Yes		20	017/2018 Income	Taxes		

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Page 28 of 67 Case number (if known) Document Debtor 1 Rosa Marie Cheeks 2.2 \$0.00 \$500.00 SC Dept of Revenue* Last 4 digits of account number \$500.00 Priority Creditor's Name PO Box 12265 When was the debt incurred? Columbia, SC 29211 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: ☐ Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt $oxedsymbol{\square}$ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes 2017/2018 Income Taxes Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? \square No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2 **Total claim** 4.1 ATI Physical Therapy 2710 \$329.00 Last 4 digits of account number Nonpriority Creditor's Name 33205 Collection Center Dr. When was the debt incurred? Chicago, IL 60693 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

debt

■ No

☐ Yes

report as priority claims

■ Other. Specify Medical Bill

☐ Check if this claim is for a community

Is the claim subject to offset?

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 29 of 67

BB&T	Last 4 digits of account number		\$1,000.00
Nonpriority Creditor's Name PO Box 819	When was the debt incurred?		ψ1,000.00
Wilson, NC 27894	_		
lumber Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	Obligations arising out of a sepreport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
☐ Yes	■ Other Specify Signature	- ·	
Capital Accounts	Last 4 digits of account number	1943	\$2,362.00
Nonpriority Creditor's Name			Ψ2,002.00
Attn: Bankruptcy Dept Po Box 140065	When was the debt incurred?	Opened 04/17	
Nashville, TN 37214 Number Street City State Zip Code	As of the date you file, the claim	ie. Chock all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	із. Спеск ан шасарріу	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
☐ Check if this claim is for a community	☐ Student loans		
ebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-shari	ng plans, and other similar debts	
Yes	Other. Specify Collection Carolinas	Attorney Chiropractic Of The	
Capital One	Last 4 digits of account number	8215	\$879.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 11/14 Last Active 2/12/19	
Salt Lake City, UT 84130 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	7.0 o ua.o , oa , o	To thook an that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a sep.	aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	a.a agroomont of arronoc that you are not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	■ Other. Specify Credit Care	d	

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main

Page 30 of 67 Case number (if known) Document Debtor 1 Rosa Marie Cheeks 4.5 \$625.00 Capital One Last 4 digits of account number 3971 Nonpriority Creditor's Name Attn: Bankruptcy Opened 03/15 Last Active Po Box 30285 When was the debt incurred? 3/29/19 Salt Lake City, UT 84130 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.6 Capital One Last 4 digits of account number 7667 \$574.00 Nonpriority Creditor's Name 15000 Capital One Dr. When was the debt incurred? Richmond, VA 23238 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Credit card Other. Specify 4.7 Cash Net USA \$1,200.00 Last 4 digits of account number Nonpriority Creditor's Name 175 W. Jackson Blvd. Ste. 1000 When was the debt incurred? Chicago, IL 60604 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

Official Form 106 E/F

debt

■ No

☐ Yes

☐ Student loans

report as priority claims

■ Other. Specify Payday loan

☐ Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 31 of 67 Case number (if known)

DCDIO	Rosa Marie Crieeks		Case Harriber (ii known)		
4.8	Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0912	\$42,439.00	
	Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 09/12 Last Active 5/31/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	Other. Specify			
		Student Lo	ans		
4.9	Douglas, Chacellor, Meyer & assocoates.	Last 4 digits of account number	9626	\$3,461.00	
	Nonpriority Creditor's Name 1000 Fairgrounds Rd Suite 200	When was the debt incurred?	Opened 1/21/18		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	Student loans	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing			
	Yes	Other. Specify 12 America	sh Loans Lic		
4.1 0	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	2898	\$683.00	
	Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117	When was the debt incurred?	Opened 08/18 Last Active 10/28/18		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community debt	Student loans	votion organization discount to the control of the		
	Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	□Yes	Other Specify Credit Card	1		

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 32 of 67
Case number (if known)

Debtor 1 Rosa Marie Cheeks 4.1 Greenville Hosptial System 6294 \$651.00 Last 4 digits of account number Nonpriority Creditor's Name 7 Independence Pt., Ste. 140 When was the debt incurred? Greenville, SC 29615 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify *Medical Bill* ☐ Yes 4.1 Greenville Phy EPIC 6294 \$2,071.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? c/o RevMD 1111 Pasquinelli Drive Suite 400 Westmont, IL 60559 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bill ☐ Yes 4.1 Hawkins Towing \$185.00 Last 4 digits of account number 3 Nonpriority Creditor's Name When was the debt incurred? 22 Cooper Street Travelers Rest, SC 29690 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Towing and Storage Fees ☐ Yes

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 33 of 67
Case number (if known)

Debtor 1 Rosa Marie Cheeks 4.1 **HSBC** 4300 \$1,776.00 Last 4 digits of account number 4 Nonpriority Creditor's Name c/o Diaz & Assoc. When was the debt incurred? 17671 Irvine Blvd. Ste. 212 Tustin, CA 92780-3129 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.1 Magnolia Place Apt \$1,500.00 Last 4 digits of account number 5 Nonpriority Creditor's Name c/o InterMark Management Corp. When was the debt incurred? 808-B Lady Street Columbia, SC 29201 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Breach of lease ☐ Yes 4.1 Merrick Bank/CardWorks 5799 \$1,649.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy Opened 11/16 Last Active Po Box 9201 When was the debt incurred? 11/27/18 Old Bethpage, NY 11804 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 34 of 67

Rosa Marie Cheeks	Case number (if known)	
National Credit Systems, Inc. Nonpriority Creditor's Name	Last 4 digits of account number 8491	\$2,838.00
Attn: Bankruptcy Po Box 312125 Atlanta, GA 31131	When was the debt incurred? Opened 08/15	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collection Attorney Sunview Apts	
NCB Management Services	Last 4 digits of account number 2975	\$1,124.00
Nonpriority Creditor's Name Attn: Bankruptcy One Allied Drive	When was the debt incurred? Opened 02/17	
Trevose, PA 19053 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Factoring Company Account Rise Credit Of South Carolina	
Prisma Health University Medical Group	Last 4 digits of account number	\$1,352.00
Nonpriority Creditor's Name c/o RevMD 1111 Pasquinelli Drive Suite 400	When was the debt incurred?	
Westmont, IL 60559 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	П	
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	Student loans	
Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Medical Bills	
	— Other, Specify	

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 35 of 67 Case number (if known)

Debt	or 1 Rosa Marie Cheeks	——————————————————————————————————————	Case number (if known)	
4.2	Progressive Leasing	land delimites of account accounts	5380	\$3,423.00
0	Nonpriority Creditor's Name	Last 4 digits of account number		φ3,423.00
	256 W Data Dr. Draper, UT 84020	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim		
	Who incurred the debt? Check one.	•		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Charge acc	count	
4.2	Republic Finance	Last 4 digits of account number	2100	\$6,223,00
1	Nonpriority Creditor's Name			70,220.00
	1209 Ne Main St Ste B Simpsonville, SC 29681	When was the debt incurred?	Opened 04/15 Last Active 7/23/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Signature	oan	
4.2	Reserve at Cavalier			\$1,400.00
2	Nonpriority Creditor's Name	Last 4 digits of account number		ψ1,400.00
	105 Cavalier Dr. Greenville, SC 29607	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	g plans, and other similar debts	
	□ Yes	Other Specify Breach of I		
	□ 169	Uther Specify Dieach Of I		

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 36 of 67 Case number (if known)

DCDIO	Rosa Warie Crieeks		Case Harriber (ii known)		
4.2	Smart Pay Leasing	Last 4 digits of account number	V7K0	\$718.00	
	Nonpriority Creditor's Name 720 East Pete Rose Way Suite 400	When was the debt incurred?			
	Cincinnati, OH 45202				
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify Breach of I	ease		
4.2	0.5			#507.00	
4	St. Francis Eastside Nonpriority Creditor's Name	Last 4 digits of account number		\$507.00	
	c/o Shafer Law Firm	When was the debt incurred?			
	2000 Riveredge Pkwy, Ste. 590				
	Atlanta, GA 30328	_			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	_			
	Debtor 1 only	Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt		aration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing			
	Yes	■ Other. Specify Medical Bil	<u>'I</u>		
4.2	Synchrony Bank/ JC Penneys	Last 4 digits of account number	6517	\$766.00	
5	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ, σσ.σσ	
	Attn: Bankruptcy		Opened 08/16 Last Active		
	Po Box 956060	When was the debt incurred?	1/21/19		
	Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	As of the date you me, the claim	is. Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a sepa	aration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other, Specify Charge Acceptage	count		

Case 19-05088-hb Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Doc 1

Page 37 of 67
Case number (if known) Document Debtor 1 Rosa Marie Cheeks

4.2 6	Wells Fargo	Last 4 digits of account num	ber	\$1,000.00
<u> </u>	Nonpriority Creditor's Name PO Box 6995	When was the debt incurred		
	Portland, OR 97228-6995			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the cl	aim is: Check all that apply	
	<u> </u>			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unser	cured claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	separation agreement or divorce that you did not	
	■ No	Debts to pension or profit-s	haring plans, and other similar debts	
	Yes	Other. Specify Checking	ng Overdraft	
is tr hav noti Name	this page only if you have others to be notified rying to collect from you for a debt you owe to se more than one creditor for any of the debts thified for any debts in Parts 1 or 2, do not fill out and Address	about your bankruptcy, for a debt to comeone else, list the original credit at you listed in Parts 1 or 2, list the or submit this page. On which entry in Part 1 or Part 2 did	,	here. Similarly, if you itional persons to be
	ital Accounts Box 140065	Line <u>4.3</u> of (Check one):	Part 1: Creditors with Priority Unsecured Clair	
	hville, TN 37214		Part 2: Creditors with Nonpriority Unsecured (Claims
	,	Last 4 digits of account number		
Nama	and Address	On which entry in Part 1 or Part 2 did	1 you list the original creditor?	
	ital One	Line 4.4 of (Check one):	Part 1: Creditors with Priority Unsecured Clair	ns
-	Box 30281		■ Part 2: Creditors with Nonpriority Unsecured 0	
Salt	Lake City, UT 84130		= 1 art 2. Groundro with Horipholity Griddourou C	Siaimo
		Last 4 digits of account number		
	and Address	On which entry in Part 1 or Part 2 did	·	
	ital One	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clair	
	00 Capital One Dr. nmond, VA 23238		Part 2: Creditors with Nonpriority Unsecured 0	Claims
Mon	illiona, VA 23230	Last 4 digits of account number		
Nomo	and Address	On which entry in Bort 1 or Bort 2 die	A you list the original graditor?	
_	iand Address ital One	On which entry in Part 1 or Part 2 did Line 4.5 of (Check one):	gyou list the original creditor? Part 1: Creditors with Priority Unsecured Clair	ne
	00 Capital One Dr.	<u></u> or (ensurens).	Part 2: Creditors with Nonpriority Unsecured 0	
Hen	rico, VA 23238		— Fart 2. Creditors with Nonphority offsecured C	Jiaiiiis
		Last 4 digits of account number		
	and Address	On which entry in Part 1 or Part 2 did	I you list the original creditor?	
	ital One	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clair	ms
	Box 30281		Part 2: Creditors with Nonpriority Unsecured 0	Claims
Sait	Lake City, UT 84130	Last 4 digits of account number		
	and Address t of Ed / Navient	On which entry in Part 1 or Part 2 did		
	Box 9635	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Clair	
	tes Barre, PA 18773		Part 2: Creditors with Nonpriority Unsecured (Claims
	,	Last 4 digits of account number		
Name	and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
	glas, Chacellor, Meyer &	Line 4.9 of (Check one):	Part 1: Creditors with Priority Unsecured Clair	ns
asso	ocoates.		■ Part 2: Creditors with Nonpriority Unsecured 0	
	N. Main Street		and the second of the second o	· -
Sain	t Charles, MO 63301	Last 4 digits of account number		
Name	and Address	On which entry in Part 1 or Part 2 did	I you list the original creditor?	
		. ,		

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Page 38 of 67 Case number (if known) Document Debtor 1 Rosa Marie Cheeks First Promier Rank Line 4.10 of (Check one):

First Premier Bank 3820 N Louise Ave	Line <u>4.10</u> of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Sioux Falls, SD 57107		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address First Premier Bank	On which entry in Part 1 or Part 2 Line 4.10 of (Check one):	did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims
PO Box 5519		■ Part 2: Creditors with Nonpriority Unsecured Claims
Sioux Falls, SD 57117-5519	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	,
Merrick Bank PO Box 660175	Line <u>4.16</u> of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Dallas, TX 75266		Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	
Merrick Bank/CardWorks Po Box 9201	Line <u>4.16</u> of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
Old Bethpage, NY 11804		■ Part 2: Creditors with Nonpriority Unsecured Claims
, 5 ,	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	
National Credit Systems, Inc.	Line <u>4.17</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
3750 Naturally Fresh Blv Atlanta, GA 30349		Part 2: Creditors with Nonpriority Unsecured Claims
7.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
NCB Management Services	Line <u>4.18</u> of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 1099 Langhorne, PA 19047		■ Part 2: Creditors with Nonpriority Unsecured Claims
Langhorne, FA 13047	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
Office of Attorney General*	Line 2.1 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims
US Dept of Justice 950 Pennsylvania Avenue, NW		☐ Part 2: Creditors with Nonpriority Unsecured Claims
Washington, DC 20530-0001		
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	
Rise Credit of SC c/o MRS BPO LLC	Line <u>4.18</u> of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
1930 Olney Ave.		Part 2: Creditors with Nonpriority Unsecured Claims
Cherry Hill, NJ 08003		
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	· ·
Synchrony Bank/ JC Penneys Po Box 965007	Line <u>4.25</u> of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
Orlando, FL 32896		■ Part 2: Creditors with Nonpriority Unsecured Claims
ŕ	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	
Synchrony Bank/JCP PO Box 960090	Line <u>4.25</u> of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
Orlando, FL 32896-0090		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
United States Attorney *	Line 2.1 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims
District of South Carolina 1441 Main Street, Ste 500		☐ Part 2: Creditors with Nonpriority Unsecured Claims
Columbia, SC 29201		
•	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

Official Form 106 E/F

Case 19-05088-hb Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Doc 1 Page 39 of 67 Case number (if known) Document

Debtor 1 Rosa Marie Cheeks

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	5,500.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	5,500.00
				1	Total Claim
Total	6f.	Student loans	6f.	\$	42,439.00
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	38,296.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	80,735.00

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main

		1 21 /1 /1 /1 /1	3.11 1.11 1.1 T.	
Fill in this infor	mation to identify your	case:		
Debtor 1	Rosa Marie Chee	ks		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Mattress Firm/Progressive Leasing 3281 N. Pleasantburg Dr. Ste. B Greenville, SC 29609	Additional Notice for Progressive Leasing
2.2	Progressive Leasing 256 W Data Dr. Draper, UT 84020	Acct# 11565380 Mattress Firm Lease Opened 6/15/2018

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main

		Docume	nt Page 41 c	of 67
Fill in this	information to identify your	case:		
Debtor 1	Rosa Marie Chee	eks		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name	
United Sta	tes Bankruptcy Court for the:	DISTRICT OF SOUTH (CAROLINA	
Case numl	ber			
(if known)				☐ Check if this is an
				amended filing
Officia	l Form 106H			
		lal (a.a.		
Sched	lule H: Your Cod	lebtors		12/15
1. Do y	you have any codebtors? (If	you are filing a joint case, o	do not list either spouse	as a codebtor.
☐ Yes	3			
Arizon No.	hin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3. s. Did your spouse, former spo	ı, Nevada, New Mexico, Pu	erto Rico, Texas, Wash	ry? (Community property states and territories include ington, and Wisconsin.)
in line Form out Co	2 again as a codebtor only	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 16G). Use Schedule D, Schedule E/F, or Schedule G to fill Column 2: The creditor to whom you owe the debt Check all schedules that apply:
				_
3.1	Name			Schedule D, line
	reame			☐ Schedule E/F, line
_				
	Number Street City	State	ZIP Code	
				Contradata D. Fran
3.2	Name			□ Schedule D, line □ Schedule E/F, line
				☐ Schedule E/F, line
_	Number Chast			
	Number Street City	State	ZIP Code	

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 42 of 67

	in this information to idebtor 1	entify your ca osa Marie (
		osa marie (Crieeks			_					
	btor 2 buse, if filing)					_					
Uni	ited States Bankruptcy	Court for the	DISTRICT OF SOUTH	H CAROLINA		_					
	se number			-				k if this is:			
(in amende i suppleme	•	g postpetitior	n chapter
\sim	fficial Form 1	061								ollowing date:	
	fficial Form 10 chedule I: Yo						N	/M / DD/ Y	YYY		12/1
sup spo atta	plying correct informatuse. If you are separa	ation. If you ted and you this form. (sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and your sith you, do not include	spouse i de inforr	s liv natio	ing with on abou	you, incl t your spo	ude inforn ouse. If mo	nation about ore space is	t your needed,
1.	Fill in your employm	• •									
١.	information.	icin		Debtor 1						ling spouse	
	If you have more than attach a separate paginformation about add	ge with	Employment status	☐ Employed ■ Not employed				☐ Empl	oyed mployed		
	employers.		Occupation	Unemployed							
	Include part-time, sea self-employed work.	asonal, or	Employer's name								
	Occupation may inclu or homemaker, if it ap		Employer's address								
			How long employed the	here?				_			
Pai	rt 2: Give Details	s About Mon	thly Income								
	imate monthly income use unless you are sepa		ate you file this form. If y	you have nothing to re	eport for	any l	ine, write	e \$0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing spo e space, attach a separ		ore than one employer, co	ombine the information	n for all e	emplo	oyers for	that perso	on on the li	nes below. If	you need
							For Del	btor 1		btor 2 or ing spouse	
2.			ry, and commissions (be calculate what the month)		2.	\$		0.00	\$	N/A	_
3.	Estimate and list mo	onthly overti	me pay.		3.	+\$		0.00	+\$	N/A	-
4	Calculate gross Inco	ome. Add lin	ne 2 + line 3		4	\$		0.00	\$	N/Δ]

Official Form 106I Schedule I: Your Income page 1

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 43 of 67

Debt	tor 1	Rosa Marie Cheeks	_	Ca	se number (if known)				
	0	and the same		F	for Debtor 1	For De		pouse	
	Cop	y line 4 here	4.	\$	0.00	\$		N/A	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.			\$		N/A	
	5b. 5c.	Mandatory contributions for retirement plans	5b. 5c.			\$		N/A	
	5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5d.			\$		N/A N/A	
	5e.	Insurance	5e.			\$		N/A	
	5f.	Domestic support obligations	5f.	\$		\$		N/A	
	5g.	Union dues	5g.	. \$		\$		N/A	
	5h.	Other deductions. Specify:	5h.	.+ \$	0.00	+ \$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$		N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$		N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a.	. \$	0.00	\$		N/A	
	8b.	Interest and dividends	8b.	. \$	0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	: 8c.	\$	0.00	\$		N/A	
	8d.	Unemployment compensation	8d.	. \$	0.00	\$		N/A	
	8e.	Social Security	8e.	. \$	0.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$		N/A	
	8g.	Pension or retirement income	8g.	. \$	0.00	\$		N/A	
	8h.	Other monthly income. Specify:	8h.	.+ \$	0.00	+ \$		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$		N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	0.00 + \$_	ı	N/A	= \$	0.00
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule adde contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe		•		edule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailes					12.	\$	0.00
13.	_ `	you expect an increase or decrease within the year after you file this form	1?					Combined monthly i	
		No. Yes. Explain: Debtor was terminated from her previous employoble looking for work.	ymen	nt or	September 12,	2019 an	d is	currently	,

Official Form 106l Schedule I: Your Income page 2

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 44 of 67

Fill in th	is information to identify yo	our case:					
Debtor 1	Rosa Marie	Cheeks			Chec	k if this is:	
Debtor 2					_	An amended filing A supplement show	ving postpetition chapter
(Spouse,						13 expenses as of	
United St	tates Bankruptcy Court for the	: DISTRIC	T OF SOUTH CAROLINA	4	1	MM / DD / YYYY	
Case nur							
(If known	n)						
Offic	ial Form 106J						
	edule J: Your	Expens	ses				12/1
Be as c	complete and accurate as ation. If more space is ne r (if known). Answer ever	possible. If eded, attacl	two married people are another sheet to this t	e filing together, bo form. On the top of a	th are equa any additio	illy responsible fo nal pages, write y	or supplying correct your name and case
Part 1:	Describe Your House	hold					
	this a joint case?						
	No. Go to line 2. Yes. Does Debtor 2 live	in a senarat	e household?				
_	□ No	iii a sopaiai	e nousenoia.				
	= ::	st file Official	Form 106J-2, Expenses	for Separate Housel	old of Debt	or 2.	
2. Do	you have dependents?	■ No					
				D		Dan an danti'a	Dana damandant
	not list Debtor 1 and botton 2.	— 103.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
Do	not state the						□ No
	pendents names.						☐ Yes
							□ No
							☐ Yes
							□ No
							☐ Yes
							□ No □ Yes
3. Do	your expenses include	- N	l-				⊔ Yes
ex	penses of people other t						
yo	urself and your depende	nts? ☐ ¹	es				
Part 2:	Estimate Your Ongoi	ng Monthly	Expenses				
expens	te your expenses as of your es as of a date after the bloom ble date.						
Include	expenses paid for with	non-cash go	overnment assistance if	you know			
	ue of such assistance an I Form 106I.)	d have inclu	ided it on <i>Schedule I:</i> Y	our Income		Your expe	enses
	e rental or home owners yments and any rent for th			nclude first mortgage	4. \$		765.00
lf r	not included in line 4:						
4a.	. Real estate taxes				4a. \$		0.00
4b.	. Property, homeowner's	s, or renter's	insurance		4b. \$		0.00
4c.	,				4c. \$		0.00
4d.				ma aquitu Issas	4d. \$ 5. \$		0.00
o. Ad	lditional mortgage paym	ents for voll	T THE IMPINE SHOW AS HOL	TIE BOUITY INANG	5 %		(1 (1/)

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 45 of 67

Deptor 1	Rosa Marie Cheeks	Case num	ber (if known)	
6. Uti	lities:			
6a.		6a.	\$	125.00
6b.		6b.	· -	0.00
6c.		6c.		120.00
6d.		6d.	\$	0.00
7. Fo	od and housekeeping supplies		\$	335.00
	ildcare and children's education costs	8.	\$	0.00
	othing, laundry, and dry cleaning	9.	·	45.00
	rsonal care products and services	10.		120.00
	dical and dental expenses	11.	· · · · · · · · · · · · · · · · · · ·	175.00
	Insportation. Include gas, maintenance, bus or train fare.	• • • •	<u> </u>	173.00
	not include car payments.	12.	\$	185.00
	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	aritable contributions and religious donations	14.	\$	160.00
	urance.			
Do	not include insurance deducted from your pay or included in lines 4 or 20.			
15	a. Life insurance	15a.	\$	0.00
15l	b. Health insurance	15b.	\$	0.00
150	c. Vehicle insurance	15c.	\$	99.00
150	d. Other insurance. Specify:	15d.	\$	0.00
6. Ta :	kes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	ecify: Vehicle tax	16.	\$	9.00
Sp	ecify: Income tax underwithholding adjustment		\$	225.00
	tallment or lease payments:			
178	a. Car payments for Vehicle 1	17a.	\$	490.00
17l	o. Car payments for Vehicle 2	17b.	\$	0.00
170	c. Other. Specify:	17c.	\$	0.00
170	d. Other. Specify:	17d.	\$	0.00
8. Yo	ur payments of alimony, maintenance, and support that you did not report as	S		
de	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		0.00
9. Otl	ner payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.		
	ner real property expenses not included in lines 4 or 5 of this form or on Sch			
	a. Mortgages on other property	20a.		0.00
_	o. Real estate taxes	20b.		0.00
	c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	d. Maintenance, repair, and upkeep expenses	20d.		0.00
20	e. Homeowner's association or condominium dues	20e.	\$	0.00
1. Otl	ner: Specify:	21.	+\$	0.00
)2 Ca	lculate your monthly expenses			
	a. Add lines 4 through 21.		\$	2,853.00
	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	2,000.00
				0.070.00
220	c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,853.00
23. Ca	culate your monthly net income.		L	
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	0.00
	o. Copy your monthly expenses from line 22c above.	23b.	·	2,853.00
_3,		_00.		2,000.00
230	c. Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	-2,853.00
	•			
	you expect an increase or decrease in your expenses within the year after y			
	example, do you expect to finish paying for your car loan within the year or do you expect you dification to the terms of your mortgage?	ur mortgage p	payment to incre	ease or decrease because of a
	, 5 5			
	No			
	Yes. Explain here:			

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 46 of 67

Fill in this infor	rmation to identify your	case:				
Debtor 1	Rosa Marie Chee					
	First Name	Middle Name	Las	st Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Lac	st Name		
(Spouse II, IIIIIg)	i iist ivaille	Wilde Name	La	st ivallie		
United States Ba	ankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA			
Case number						
(if known)						☐ Check if this is an amended filing
Official For					_	
Declarat	tion About a	ın Individual	Debt	or's Sched	dules	12
Sig	ın Below					
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help	you fill out bankru	ptcy forms?	
■ No						
☐ Yes.	Name of person					kruptcy Petition Preparer's Notic , and Signature (Official Form 1
	alty of perjury, I declare re true and correct.	that I have read the sum	nmary and s	schedules filed with	this declaration	on and
X /s/Ro	sa Marie Cheeks		x			
	Marie Cheeks ure of Debtor 1			Signature of Debtor	· 2	
Date	September 27, 2019			Date		

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 47 of 67

=:11	in this inform	ation to identify you				
	tor 1	Rosa Marie Che				
	ioi i	First Name	Middle Name	Last Name		
1 -	tor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ban	kruptcy Court for the:	DISTRICT OF SOUTH CA	ROLINA		
		. ,				
(if kno	e number					Check if this is an
						amended filing
Off	ficial For	m 107				
			Affairs for Individ	luals Filing for E	Bankruptcy	4/19
Be a infor num	s complete ar mation. If mo ber (if known)	nd accurate as possi ore space is needed,). Answer every ques	ble. If two married people at attach a separate sheet to t stion.	re filing together, both are his form. On the top of an	equally responsible for su	
Part			rital Status and Where You	Lived Before		
1.	What is your	current marital statu	s?			
	☐ Married■ Not marri	ied				
2.	During the la	st 3 years, have you	lived anywhere other than v	vhere you live now?		
	□ No					
	_	all of the places you I	ved in the last 3 years. Do no	t include where you live nov	V.	
	Debtor 1 Price	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there
	29 Seyle St Greenville,		From-To: 11/05/2016-06/ 2017	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
	s and territorie	s include Arizona, Ca	ver live with a spouse or legi lifornia, Idaho, Louisiana, Nev medule H: Your Codebtors (Off	rada, New Mexico, Puerto R		
Part	Explain	the Sources of You	r Income			
	Fill in the total	amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	II businesses, including part	-time activities.	endar years?
	□ No					
	Yes. Fill i	n the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$30,232.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main

Page 48 of 67
Case number (if known) Document Debtor 1 Rosa Marie Cheeks

			Dobtor 4			Dobtor 2		
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.		s income e deductions and sions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
For last cale (January 1 to	endar year: o December 3	1, 2018)	■ Wages, commissions bonuses, tips	; ,	\$37,727.00	☐ Wages, com bonuses, tips	missions,	
			☐ Operating a business	;		☐ Operating a	business	
	ndar year befo o December 3		■ Wages, commissions bonuses, tips	;,	\$32,914.00	☐ Wages, com bonuses, tips	missions,	
			☐ Operating a business	;		☐ Operating a	business	
and othe winnings List each	r public benefit . If you are filing	payments; g a joint cas e gross inco	er that income is taxable. pensions; rental income; ir e and you have income th me from each source sepa	nterest; divid at you receiv	lends; money colled ved together, list it d	cted from lawsuits; only once under De	royalties; an ebtor 1.	
			Debtor 1			Debtor 2		
			Sources of income Describe below.	each	s income from source e deductions and sions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
	ry 1 of current ı filed for bank		Retirement Withdrawal		\$8,234.00			
6. Are eithe	er Debtor 1's of Neither Debindividual properties of Neither Debindividual properties of Neither Debtor 1 or During the 9 No.	or Debtor 2' otor 1 nor D imarily for a 0 days befor Go to line 7 List below expaid that create the continuity adjustment Debtor 2 or 0 days befor Go to line 7	each creditor to whom you editor. Do not include payr payments to an attorney for on 4/01/22 and every 3 your both have primarily course you filed for bankruptcy.	mer debts? nsumer debts? nsumer debts n, did you pay paid a total of ments for do for this bankr ears after the nsumer deb n, did you pay	ots. Consumer debite." y any creditor a total of \$6,825* or more mestic support obliquency case. at for cases filed on ots. y any creditor a total	al of \$6,825* or more pay gations, such as che or after the date or all of \$600 or more?	re? ments and t ild support a f adjustment	he total amount you and alimony. Also, do
		include pay	each creditor to whom you ments for domestic supporthis bankruptcy case.					
Credito	r's Name and	Address	Dates of pay	ment	Total amount	Amount you	Was this p	payment for

Document Page 49 of 67 ase number (if known) Debtor 1 Rosa Marie Cheeks Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. П No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property Explain what happened **IRS** Wages garnished September \$502.00 2019 ☐ Property was repossessed. □ Property was foreclosed. ☐ Property was garnished. Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes

Entered 09/27/19 12:03:15 Desc Main

Case 19-05088-hb

Doc 1

Filed 09/27/19

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 50 of 67 Case number (if known)

Debtor 1 Rosa Marie Cheeks

Pa	t 5: List Certain Gifts and Contributio	ns			
13.	□ No	ruptcy, c	lid you give any gifts with a total value of more t	han \$600 per person'	?
	Yes. Fill in the details for each gift.				
	Gifts with a total value of more than \$600 per person		Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:	d			
	Julia Lyons		\$2500 (est., but not really sure) - assistance to meet needs	Past 2 yrs	\$0.00
	Person's relationship to you: <i>Daughter</i>				
14.	□ No		did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or	contributi	on.		
	Gifts or contributions to charities that total more than \$600 Charity's Name		Describe what you contributed	Dates you contributed	Value
	Address (Number, Street, City, State and ZIP Cod	de)	40000 ()		
	Campbell Chapel		\$3000 (est)	past 2 years	\$0.00
	or gambling? ■ No □ Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List pending noe claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
			, ,		
Pai	t 7: List Certain Payments or Transfer	rs			
16.	consulted about seeking bankruptcy or	preparir	d you or anyone else acting on your behalf pay on a bankruptcy petition? s, or credit counseling agencies for services require		rty to anyone you
	□ No ■ Yes. Fill in the details.				
	Person Who Was Paid		Description and value of any property	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not	You	transferred	or transfer was	payment
	Edward L. Bailey 251 South Pine Street Spartanburg, SC 29302			6/2019-9/2019	\$1,382.00
	Access Counseling, Inc.* 633 W 5th Street, Ste 26001 Los Angeles, CA 90071		ccc	9/2019	\$15.00

Page 51 of 67
Case number (if known) Debtor 1 Rosa Marie Cheeks 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No П Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was **Address** property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. П No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold. before closing or Code) moved, or transfer transferred Sharonview FCU XXXX-2018; account \$0.00 Checking was closed to □ Savings stop creditor ☐ Money Market debiting; \$114 □ Brokerage estimated in the □ Other acct at the time XXXX-**Charter Communications** September 2019 \$8,234.00 ☐ Checking □ Savings ☐ Money Market □ Brokerage ■ Other 401(k) and 401(a) Carolinas Telco Federal CU XXXX-2021 August 2019 \$0.00 ☐ Checking Savings ■ Money Market □ Brokerage □ Other

Case 19-05088-hb

Doc 1

Filed 09/27/19

Document

Entered 09/27/19 12:03:15 Desc Main

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 52 of 67 Case number (if known)

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities cash, or other valuables?					
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?	
22.	Have you stored property in a storage unit or pl	ace other than your home within 1	year before you filed for bankruptcy	?	
	NoYes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control for S	Someone Else			
23.	Do you hold or control any property that someo for someone.	ne else owns? Include any propert	ty you borrowed from, are storing for	, or hold in trust	
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value	
Par	t 10: Give Details About Environmental Informa	ation			
or	the purpose of Part 10, the following definitions	apply:			
	Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these substances.	ir, land, soil, surface water, ground			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		aw, whether you now own, operate, o	or utilize it or used	
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic s	ubstance,	
Rер	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.		
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under or in violation of an environme	ental law?	
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
25.	Have you notified any governmental unit of any	release of hazardous material?			
	No				
	Yes. Fill in the details. Name of site	Governmental unit	Environmental law, if you	Date of notice	
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)			

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 53 of 67 Case number (if known)

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						nd orders.	
	■ N	lo					
	□ Y	es. Fill in the details.					
	Case Case	Title Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nati	ure of the case	Status of the case	
Par	t 11:	Give Details About Your Business or Co	onnections to Any Business				
27.	Within	n 4 years before you filed for bankruptcy	, did you own a business or have an	y of t	the following connections to any	business?	
		A sole proprietor or self-employed in	a trade, profession, or other activity,	eithe	er full-time or part-time		
		A member of a limited liability compar	ny (LLC) or limited liability partnershi	ip (Ll	_P)		
		A partner in a partnership					
		An officer, director, or managing exec	cutive of a corporation				
		An owner of at least 5% of the voting	or equity securities of a corporation				
	■ N	lo. None of the above applies. Go to Pa	rt 12.				
	□ Y	es. Check all that apply above and fill ir	n the details below for each business	S.			
	Busir		Describe the nature of the business Name of accountant or bookkeeper		Employer Identification number		
					Do not include Social Security number or ITIN.		
					Dates business existed		
		n 2 years before you filed for bankruptcy ttions, creditors, or other parties.	,, did you give a financial statement t	to an	yone about your business? Inclu	de all financial	
	■ N	lo					
	□ Y	es. Fill in the details below.					
	Name Addre		Date Issued				

Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Case 19-05088-hb Page 54 of 67
Case number (if known) Document

Debtor 1 Rosa Marie Cheeks

Part 12: Sign Below		
are true and correct. I understand that ma	of Financial Affairs and any attachments, and I declare under penalty of perjury that ting a false statement, concealing property, or obtaining money or property by fraud i up to \$250,000, or imprisonment for up to 20 years, or both.	
/s/ Rosa Marie Cheeks		
Rosa Marie Cheeks	Signature of Debtor 2	
Signature of Debtor 1		
Date September 27, 2019	Date	
Did you attach additional pages to Your S	atement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?	
■ No		
☐ Yes		
Did you pay or agree to pay someone who	is not an attorney to help you fill out bankruptcy forms?	
■ No		
☐ Yes. Name of Person . Attach the	ankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 55 of 67

Fill in this infor	mation to identify your	case:		
Debtor 1	Rosa Marie Chee	ks		
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF SC	OUTH CAROLINA	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fa				
Official Fo		n for Indiv	viduals Eiling Under Ch	aptor 7
Stateme	iii oi iiileiilio	ii ioi iiiaiv	riduals Filing Under Ch	12/15
	lividual filing under cha	-	I out this form if:	
_	ve claims secured by yo			
You must file th	ever is earlier, unless th	ithin 30 days after	ot expired. you file your bankruptcy petition or by the e time for cause. You must also send cop	
	eople are filing togethe nd date the form.	r in a joint case, bo	th are equally responsible for supplying c	orrect information. Both debtors must
	and accurate as possib your name and case nu		s needed, attach a separate sheet to this fo	orm. On the top of any additional pages,
Part 1: List Y	our Creditors Who Hav	e Secured Claims		
•	_	art 1 of Schedule D	: Creditors Who Have Claims Secured by	Property (Official Form 106D), fill in the
information b Identify the cr	elow. reditor and the property t	hat is collateral	What do you intend to do with the prop	
			secures a debt?	as exempt on Schedule C?
Creditor's	AutoMonov Inc		_	_
name:	AutoMoney, Inc.		Surrender the property.	■ No
name.			☐ Retain the property and redeem it.☐ Retain the property and enter into a	☐ Yes
Description of		ifica 261,667	Reaffirmation Agreement.	
property securing debt	miles :: VIN: 2C4GM68455	R550014	☐ Retain the property and [explain]:	
Creditor's	Badcock		■ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	=
Description of	f Living room furnit	ure hed	☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property	Living room ranna	aro, sou	Retain the property and [explain]:	
securing debt	:			
			_	
Creditor's L name:	Bridgecrest Accepta	nce Corp.	☐ Surrender the property.	■ No
name.			☐ Retain the property and redeem it.☐ Retain the property and enter into a	☐ Yes
Description of	f 2015 Chevrolet Cr	uze	Reaffirmation Agreement.	_ 100

Official Form 108

property

Statement of Intention for Individuals Filing Under Chapter 7

Retain the property and [explain]:

VIN: 1G1PC5SB1F7145364

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 56 of 67

Debtor 1 Rosa Ma	rie Cheeks	Case number (if kne	own)
securing debt:		Keep Current	
Creditor's Cash name:	Loan	☐ Surrender the property.	□No
	rsonal Property	Retain the property and redeem it.Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt:		Retain the property and [explain]: avoid lien using 11 U.S.C. § 522(f)	
Creditor's <i>World</i> name:	Acceptance/Finance Corp	☐ Surrender the property. ☐ Retain the property and redeem it.	□No
Description of Pe	rsonal Property	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt:		■ Retain the property and [explain]: avoid lien using 11 U.S.C. § 522(f)	
For any unexpired per in the information bel	ow. Do not list real estate leases. l	s ed in Schedule G: Executory Contracts and Unexplant of the Schedule G: Executory Contracts and Unexplant of the Schedule G: Executory Contracts and Unexplant of the trustee does not assume it. 11 U.S.C. § 3656	; the lease period has not yet ended.
Describe your unexp	ired personal property leases		Will the lease be assumed?
Lessor's name:	Progressive Leasing		■ No
			☐ Yes
Description of leased Property:	Acct# 11565380 Mattress Firm Lease Opened 6/15/2018		

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 57 of 67

Debtor 1	Rosa Marie Cheeks	Case number (if known)
Part 3:	Sign Below	
	enalty of perjury, I declare that I have indicate that is subject to an unexpired lease.	d my intention about any property of my estate that secures a debt and any personal
X /s/	Rosa Marie Cheeks	Χ
	Nosa marie oricens	$\boldsymbol{\Lambda}$
	osa Marie Cheeks	Signature of Debtor 2
Ro		

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 58 of 67

Fill in	this information to identify your case:					irected in this form and	l in Form
Debte	or 1 Rosa Marie Cheeks		122	2A-1Sup	p:		
Debte (Spous	or 2 			■ 1. The	ere is no presi	umption of abuse	
Unite	d States Bankruptcy Court for the: District of South C	Carolina	'	ар	plies will be m	o determine if a presur nade under <i>Chapter 7</i>	•
Case (if know	number _{vn)}		_	☐ 3. The	e Means Test	cial Form 122A-2). does not apply now be service but it could ap	
~ · · ·				☐ Che	ck if this is a	n amended filing	
	cial Form 122A - 1						
Cha	apter 7 Statement of Your Cui	rrent Mon	ithly inc	ome	!		12/15
attach case n	complete and accurate as possible. If two married people as a separate sheet to this form. Include the line number to wumber (if known). If you believe that you are exempted frowing military service, complete and file Statement of Exempted: Calculate Your Current Monthly Income	which the addition on a presumption of	al information a of abuse becau	applies. C se you d	on the top of an onot have prin	ny additional pages, wri narily consumer debts o	te your name and or because of
1.	What is your marital and filing status? Check one or	nly.					
	■ Not married. Fill out Column A, lines 2-11.						
	\square Married and your spouse is filing with you. Fill ∞	ut both Columns	A and B, lines	2-11.			
	\square Married and your spouse is NOT filing with you.	You and your s	pouse are:				
	\square Living in the same household and are not lega	ally separated. F	ill out both Co	lumns A	and B, lines 2	2-11.	
	Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evading.	egally separated	under nonban	kruptcy	law that applie	es or that you and you	
10 ⁻ the	in the average monthly income that you received from all (10A). For example, if you are filing on September 15, the 6-m 6 months, add the income for all 6 months and divide the total buses own the same rental property, put the income from that p	nonth period would I by 6. Fill in the res	be March 1 throught. Do not include	ugh Augu: de any inc	st 31. If the amo	ount of your monthly incompre than once. For examp	ne varied during ble, if both
				Column Debtor		Column B Debtor 2 or non-filing spouse	
	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commissio	ns (before all	\$	3,174.50	\$	
	Alimony and maintenance payments. Do not include Column B is filled in.	payments from a	a spouse if	\$	0.00	\$	
	All amounts from any source which are regularly pa of you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	. Include regular d, your dependen	contributions its, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession,						
		Debt	tor 1				
	Gross receipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>					
	Ordinary and necessary operating expenses	0.00	Copy here ->	\$	0.00	\$	
	Net monthly income from a business, profession, or far Net income from rental and other real property	m \$	copy nere >	Ψ	0.00	Ψ	
6.	net income from remai and other real property	Debt	tor 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00					
	Net monthly income from rental or other real property	\$ 0.00	Copy here ->	\$_	0.00	\$	
	Interest, dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 59 of 67

Debtor 1 Rosa Marie Cheeks Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a bene	efit under					
	For you \$	0	.00					
	For you \$ For your spouse \$							
9.	Pension or retirement income. Do not include any am benefit under the Social Security Act.		as a	\$	0.00	\$		
10.	Income from all other sources not listed above. Spec Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hum domestic terrorism. If necessary, list other sources on a total below.	ecurity Act or payme nanity, or internationa	nts al or					
	·			\$	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total		\$	3,174.50	+ _		= \$	3,174.50
Part	2: Determine Whether the Means Test Applies to Calculate your current monthly income for the year.							
	12a. Copy your total current monthly income from line 1	•		Сор	y line 11 h	ere=>	\$	3,174.50
	Multiply by 12 (the number of months in a year)						X	12
	12b. The result is your annual income for this part of the	form				12b	- \$	38,094.00
13.	Calculate the median family income that applies to y	ou. Follow these ste	ps:					
	Fill in the state in which you live.	sc						
	Fill in the number of people in your household.	1						
	Fill in the median family income for your state and size of To find a list of applicable median income amounts, go of for this form. This list may also be available at the bankr	online using the link s		in the separa		13. ions	\$	46,710.00
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. Or Go to Part 3.	the top of page 1, c	heck box	1, There is	no presum	ption of abus	е.	
	14b. Line 12b is more than line 13. On the top of			esumption o	f abuse is o	determined by	Form 1	22A-2.

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 60 of 67

Debtor 1	Rosa Marie Cheeks	Case number (if known)	
Part 3:	Sign Below		
	By signing here, I declare under penalty of perjury that the info	ormation on this statement and in any attac	chments is true and correct.
	X /s/ Rosa Marie Cheeks		
	Rosa Marie Cheeks Signature of Debtor 1		
Da	September 27, 2019 MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this	s form.	

Case 19-05088-hb Doc 1 Filed 09/27/19 Entered 09/27/19 12:03:15 Desc Main Document Page 61 of 67

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of South Carolina

In re	Rosa Marie Cheeks		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSA	ATION OF ATTOR	NEY FOR DE	CBTOR(S)
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), leading to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or	the petition in bankruptcy, o	r agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,382.00
	Prior to the filing of this statement I have received		. \$	1,382.00
	Balance Due			0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compensa	ation with any other person ur	nless they are meml	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of			
5.	In return for the above-disclosed fee, I have agreed to render	legal service for all aspects	of the bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statement c. Representation of the debtor at the meeting of creditors and d. [Other provisions as needed] Lien avoidance and redemption motions, ar Authorization Contract. 	nt of affairs and plan which n nd confirmation hearing, and	nay be required; any adjourned hear	rings thereof;
6.	By agreement with the debtor(s), the above-disclosed fee doe Amendments to the schedules, work general or matters not anticipated at the time of filing payments to any creditor or to maintain inseptitions to dismiss by the US Trustee, defendischarge or dischargeability), motions to do of titles from creditors, adversary proceedings.	ated as a result of debtoring, any work generated a urance on any collateral ense against any actions convert to Chapter 13, mo	r's mistakes, mo is a result of deb (e.g. a 362 motic brought by crea ptions for aband	tor's failure to make on), defenses against any litors (including objections to onment of property, recovery
	C	ERTIFICATION		
	I certify that the foregoing is a complete statement of any agrankruptcy proceeding.	reement or arrangement for p	ayment to me for re	epresentation of the debtor(s) in
S	September 27, 2019	/s/ Edward L. Baile	V	
_	Date	Edward L. Bailey 1		
		Signature of Attorney		
		Bailey Law Firm 251 South Pine Str	eet	
		Spartanburg, SC 2	9302	
		(864) 582-3733 Fa.	x: (864) 948-9997	7
		Name of law firm		

LOCAL OFFICIAL FORM 1007-1(b) TO SC LBR 1007-1

United States Bankruptcy Court District of South Carolina

In re	Rosa Marie Cheeks	D.1. ()	Case No.	
		Debtor(s)	Chapter 7	
	CERTIFICAT	ION VERIFYING CREDIT	TOR MATRIX	
Bankrupto CM/ECF,	The above named debtor, or attorney cy Rule 1007-1 that the master mailing or conventionally filed in a typed has on to, the debtor's schedules, statements a	g list of creditors submitted eith ard copy scannable format which	er on computer diskette, electronic has been compared to, and con	cally filed via tains identical
N	Master mailing list of creditors submitted	via:		
	(a) computer diskette	;		
	(b) scannable hard co			
	(c) X electronic version fi	led via CM/ECF		
Date: S	September 27, 2019	/s/ Edward L. Bailey		
Bute		Signature of Attorney Edward L. Bailey 1153		
		Bailey Law Firm		
		251 South Pine Street Spartanburg, SC 29302		
		(864) 582-3733 Fax: (864) 9	18-9997	
		Typed/Printed Name/Address	Telenhone	

1153 SC

District Court I.D. Number

ATI PHYSICAL THERAPY 33205 COLLECTION CENTER DR. CHICAGO IL 60693

AUTOMONEY, INC. 501 MAULDIN ROAD GREENVILLE SC 29605

BADCOCK PO BOX 724 MULBERRY FL 33860

BB&T PO BOX 819 WILSON NC 27894

BRIDGECREST ACCEPTANCE CORP. PO BOX 2997 PHOENIX AZ 85062-2997

CAPITAL ACCOUNTS ATTN: BANKRUPTCY DEPT PO BOX 140065 NASHVILLE TN 37214

CAPITAL ACCOUNTS
PO BOX 140065
NASHVILLE TN 37214

CAPITAL ONE ATTN: BANKRUPTCY PO BOX 30285 SALT LAKE CITY UT 84130

CAPITAL ONE 15000 CAPITAL ONE DR. RICHMOND VA 23238

CAPITAL ONE PO BOX 30281 SALT LAKE CITY UT 84130

CAPITAL ONE 15000 CAPITAL ONE DR. HENRICO VA 23238 CASH LOAN
200 N PLEASANTBURG DR., STE. B
GREENVILLE SC 29607

CASH NET USA 175 W. JACKSON BLVD. STE. 1000 CHICAGO IL 60604

DEPT OF ED / NAVIENT ATTN: CLAIMS DEPT PO BOX 9635 WILKES BARR PA 18773

DEPT OF ED / NAVIENT PO BOX 9635 WILKES BARRE PA 18773

DOUGLAS, CHACELLOR, MEYER & ASSOCOATES. 1000 FAIRGROUNDS RD SUITE 200 SAINT CHARLES MO 63301

DOUGLAS, CHACELLOR, MEYER & ASSOCOATES. 201 N. MAIN STREET SAINT CHARLES MO 63301

FIRST PREMIER BANK ATTN: BANKRUPTCY PO BOX 5524 SIOUX FALLS SD 57117

FIRST PREMIER BANK 3820 N LOUISE AVE SIOUX FALLS SD 57107

FIRST PREMIER BANK PO BOX 5519 SIOUX FALLS SD 57117-5519

GREENVILLE HOSPTIAL SYSTEM 7 INDEPENDENCE PT., STE. 140 GREENVILLE SC 29615

GREENVILLE PHY EPIC C/O REVMD 1111 PASQUINELLI DRIVE SUITE 400 WESTMONT IL 60559

HAWKINS TOWING 22 COOPER STREET TRAVELERS REST SC 29690

HSBC C/O DIAZ & ASSOC. 17671 IRVINE BLVD. STE. 212 TUSTIN CA 92780-3129

INTERNAL REVENUE SERVICE*
CENTRALIZED INSOLVENCY
PO BOX 7346
PHILADELPHIA PA 19104-7346

MAGNOLIA PLACE APT C/O INTERMARK MANAGEMENT CORP. 808-B LADY STREET COLUMBIA SC 29201

MATTRESS FIRM/PROGRESSIVE LEASING 3281 N. PLEASANTBURG DR. STE. B GREENVILLE SC 29609

MERRICK BANK PO BOX 660175 DALLAS TX 75266

MERRICK BANK/CARDWORKS ATTN: BANKRUPTCY PO BOX 9201 OLD BETHPAGE NY 11804

MERRICK BANK/CARDWORKS PO BOX 9201 OLD BETHPAGE NY 11804

NATIONAL CREDIT SYSTEMS, INC. ATTN: BANKRUPTCY PO BOX 312125 ATLANTA GA 31131 NATIONAL CREDIT SYSTEMS, INC. 3750 NATURALLY FRESH BLV ATLANTA GA 30349

NCB MANAGEMENT SERVICES ATTN: BANKRUPTCY ONE ALLIED DRIVE TREVOSE PA 19053

NCB MANAGEMENT SERVICES PO BOX 1099 LANGHORNE PA 19047

OFFICE OF ATTORNEY GENERAL*
US DEPT OF JUSTICE
950 PENNSYLVANIA AVENUE, NW
WASHINGTON DC 20530-0001

PRISMA HEALTH UNIVERSITY MEDICAL GROUP C/O REVMD 1111 PASQUINELLI DRIVE SUITE 400 WESTMONT IL 60559

PROGRESSIVE LEASING 256 W DATA DR. DRAPER UT 84020

REPUBLIC FINANCE 1209 NE MAIN ST STE B SIMPSONVILLE SC 29681

RESERVE AT CAVALIER 105 CAVALIER DR. GREENVILLE SC 29607

RISE CREDIT OF SC C/O MRS BPO LLC 1930 OLNEY AVE. CHERRY HILL NJ 08003

SC DEPT OF REVENUE* PO BOX 12265 COLUMBIA SC 29211 SMART PAY LEASING 720 EAST PETE ROSE WAY SUITE 400 CINCINNATI OH 45202

ST. FRANCIS EASTSIDE C/O SHAFER LAW FIRM 2000 RIVEREDGE PKWY, STE. 590 ATLANTA GA 30328

SYNCHRONY BANK/ JC PENNEYS ATTN: BANKRUPTCY PO BOX 956060 ORLANDO FL 32896

SYNCHRONY BANK/ JC PENNEYS PO BOX 965007 ORLANDO FL 32896

SYNCHRONY BANK/JCP PO BOX 960090 ORLANDO FL 32896-0090

UNITED STATES ATTORNEY * DISTRICT OF SOUTH CAROLINA 1441 MAIN STREET, STE 500 COLUMBIA SC 29201

WELLS FARGO
PO BOX 6995
PORTLAND OR 97228-6995

WORLD ACCEPTANCE/FINANCE CORP ATTN: BANKRUPTCY PO BOX 6429 GREENVILLE SC 29606

WORLD ACCEPTANCE/FINANCE CORP 108 FREDRICK ST. GREENVILLE SC 29607